PTO/SB/22 (12-04)

Approved for use through 7/31/2006. OMB 0651-0031

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| | | | EXTENSION OF TIME FY 2005 | | | Docket Number (C | optional) | | | |
|--|--|--------------------------|--|----------------------|--------------------------|----------------------|---------------|--|--|--|
| | (Fe | es pursua | nt to the Consolidated Appropria | tions Act, 2005 (i | H.R. 4818).) | | | | | |
| | | Number 1 | Filed December | 1, 2003 | | | | | | |
| For ; | SYSTE | M AND N | METHOD FOR ANALYZING MI | EDICAL TREAT | TMENT DATA | | | | | |
| Art U | nit 373 | 35 | | | | Examiner Christi | ne Hopkins | | | |
| | is a re- | - | ler the provisions of 37 CFR 1.1 | 36(a) to extend | the period for filing | a reply in the abo | ve identified | | | |
| | | | sion and fee are as follows (che | ck time period o | desired and enter th | e appropriate fee | below): | | | |
| | | | ee | | | | | | | |
| | \boxtimes | One mo | onth (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ | 120 | | | |
| | | Two mo | nths (37 CFR 1.17(a)(2)) | \$450 | \$225 | \$ | 0 | | | |
| | | Three m | nonths (37 CFR 1.17(a)(3)) | \$1020 | \$510 | \$ | 0 | | | |
| | | Four mo | onths (37 CFR 1.17(a)(4)) | \$1590 | \$795 | \$ | 0 | | | |
| | | Five mo | onths (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ | 0 | | | |
| _ | A | | a amali antitu atatua. Saa 27 CE | ID 1 07 | | | | | | |
| _ | Applicant claims small entity status. See 37 CFR 1.27. | | | | | | | | | |
| Z | A che | ck in the | 120.0 | 0 OP | | | | | | |
| | Payment by credit card. Form PTO-2038 is attached. | | | | | | | | | |
| X | The Director has already been authorized to charge fees in this application to a Deposit Account. | | | | | | | | | |
| X | The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number06-2425I have enclosed a duplicate copy of this sheet. | | | | | | | | | |
| | WARN form. | lING: Info | rmation on this form may become | public. Credit ca | ard information shou | ld not be included | on this | | | |
| am | the | | applicant/inventor | | | | | | | |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). | | | | | | | | | | |
| | | | nber | | | | | | | |
| | | X | attorney or agent under 37 CF Registration number if acting under | | ,463 | | | | | |
| - | -1 | buna | refforalle. | 1 | August 31, 2006 | | | | | |
| - | | | Signature | - | Date | | | | | |
| | | | Norman L. Morales | | (310) 824-5555 | | | | | |
| _ | | | Typed or printed name | Te | ephone Number | | | | | |
| NOT forms | E: Signa | atures of al than one | I the inventors or assignees of recorsignature is required, see below. | d of the entire inte | erest or their represent | ative(s) are require | d. Submit mul | | | |
| | Total of | | forms are submitted. | | | | | | | |

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Ode:

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| | | | | Complete if Known | |
|--|-----------|------------|----------------------|----------------------|--|
| es pursuant to the Consolidated Appropri | | | Application Number | 10/726,202 | |
| FEE TRANSI | | IAL | Filing Date | December 1, 2003 | |
| for FY 200 | 16 | | First Named Inventor | Richard M. Batch | |
| | | | Examiner Name | Christine D. Hopkins | |
| Applicant claims small entity statu | s. See 37 | 7 CFR 1.27 | Art Unit . | 3735 | |
| TOTAL AMOUNT OF PAYMENT | (\$) | \$120.00 | Attorney Docket No. | 61616 | |

| METHOD OF PAYMENT (check all that apply) | | | | | | | | | |
|--|---------------|-------------------|--------------------|-------------------------------|--------------------|-------------------|--------------------------|--|--|
| Check Credit | Card | Money Order | ☐ None | Other | (please identify): | | | | |
| . 57 | osit Account | Number: | 06-2425 | Deposit A | ccount Name: | FULWIDER | R PATTON LLP | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | | | |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the fill | | | | | | | | | |
| Charge | | | | | | | | | |
| fee(s) under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card | | | | | | | | | |
| information and authorization on PTO-2638. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) | | | | | | | | | |
| | | | | mig or may b | be subject to | a surcharge | | | |
| 1. BASIC FILING, SEAR | | | FEES SEARCH | EEEC | EVAMINA | TION FEES | | | |
| | FILING F | Small Entity | SEARON | Small Entity | EXAMINA | Small Entity | | | |
| Application Type | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fees Paid(\$) | | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | | | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | | | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | | | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | | |
| 2. EXCESS CLAIM FEES | | | | | | | Compil Emiliar | | |
| Fee Description | • | | | | | Fee (\$) | Small Entity Fee (\$) | | |
| Each claim over 20 (inclu | idina Reissue | (e) | | | | 50 | 25 | | |
| Each independent claim of | • | • | :) | | | 200 | 100 | | |
| Multiple dependent claims | | | • | | | 360 | 180 | | |
| multiple dependent oldano | | | | | | ependent Claims | | | |
| Total Claims | Extra Claim | s <u>Fee (\$)</u> | <u>F</u> | ee Paid (\$) | | Fee (\$) | Fee Paid (\$) | | |
| 20 or HP = | | | <u>\$50.00</u> = _ | \$0.00 | | **** | - | | |
| HP = highest number of total claims paid for, if greater than 20. | | | | | | | | | |
| Indep. Claims | Extra Claim | | _ | <u>ee Paid (\$)</u> \$0.00 | | | | | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | | | | | | |
| 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | | |
| Total Sheets | Extra She | | Number of each | additional 50 or | fraction thereof | Fee (\$) | Fee Paid (\$) | | |
| - 100 = | 0 | / 50 | 0 | _ (round up to | a whole | x <u>\$250.00</u> | _ =\$0.00_ | | |
| 4. OTHER FEE(S) | | | | | | | Fee Paid (\$) | | |
| Non-English specification, \$130 fee (no small entity discount) | | | | | | | | | |
| Other (e.g., late filing surd | harge): One | month extens | ion of time | | | | \$120.00 | | |

| SUBMITTED BY | | 4. | | | | | |
|-------------------|-----|-------------------|------|--------------------------------------|--------|-----------|-----------------|
| Signature | 1/2 | men Mo | rall | Begistration No. (Attorney/Agent) | 55,463 | Telephone | 310 824-5555 |
| Name (Print/Type) | | Norman L. Morales | | | | | August 31, 2006 |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.